

DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

EMERGENCY PHONE WITH ALTERNATE NUMBER CALLING CAPABILITY,

the specification of which is attached hereto unless the following box is checked:

☐ was filed on as United States Application No. or PCT International Application No. and was amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Not Claimed

(Number)

(Country)

(Day/Month/Year Filed)

☐

(Number)

(Country)

(Day/Month/Year Filed)

☐

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application listed below.

(Application Number)

(Filing Date)

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

09/538,364

March 29, 2000

Pending

(Application Number)

(Filing Date)

(Status—patented, pending, abandoned)

(Application Number)

(Filing Date)

(Status—patented, pending, abandoned)

I hereby appoint the following attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Mark S. Graham, Reg. No. 32,355
Andrew S. Neely, Reg. No. 28,979
Robert O. Fox, Reg. No. 34,165
David E. LaRose, Reg. No. 34,369

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Andrew S. Neely
LUEDEKA, NEELY & GRAHAM, P.C.
P. O. Box 1871
Knoxville, TN 37901.

I hereby authorize the attorney(s) or agent(s) named herein to accept and follow instructions from **AMERICAN SECURE CARE, LLC** as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the attorney(s) or agent(s) and myself. In the event of a change in the persons from whom instructions may be taken, the U.S. attorney(s) or agent(s) named herein will be so notified by me.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor (given name, family name): **Brian M. Boling**

Inventor's signature 

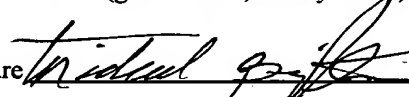
Date 10/10/2000

Residence: 2404 Keller Bend Road, Knoxville, TN 37922

Citizenship: US

Post Office Address: 2404 Keller Bend Road
Knoxville, TN 37922

Full name of second joint inventor (given name, family name): **Michael C. Bernstein**

Second Inventor's signature 

Date 10/10/00

Residence: 236 Treyburn, Knoxville, TN 37922

Citizenship: US

Post Office Address: 236 Treyburn
Knoxville, TN 37922

Full name of third joint inventor (given name, family name): **Nicholas A. Natale**

Third Inventor's signature 

Date 10/10/2000

Residence: 8819 Lennox View Way, Knoxville, TN 37923

Citizenship: US

Post Office Address: 8819 Lennox View Way
Knoxville, TN 37923

VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(f) & 1.27(c)–SMALL BUSINESS CONCERN

Docket Number
52078.P5

Applicant or Patentee: **Brian M. BOLING et al.**

Application or Patent No.:

Filed or Issued:

Title: **EMERGENCY PHONE WITH SINGLE-BUTTON ACTIVATION**

I hereby declare that I am

☐ the owner of the small business concern identified below:

☒ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF SMALL BUSINESS CONCERN: **AMERICAN SECURE CARE, LLC**

ADDRESS OF SMALL BUSINESS CONCERN: **109 David Lane, Knoxville, TN 37922**

I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR 121.12, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees to the United States Patent and Trademark Office, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention described in:

☒ the specification filed herewith with title as listed above.

☐ the application identified above.

☐ the patent identified above.

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights in the invention must file separate verified statements averring to their status as small entities, and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization having any rights in the invention is listed below:

☒ no such person, concern or organization exists.

☐ each such person, concern or organization is listed below.

Separate verified statements are required for each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: Brian M. Boling

TITLE OF PERSON IF OTHER THAN OWNER: Managing Member

ADDRESS OF PERSON SIGNING: 109 David Lane Knoxville, TN 37922

SIGNATURE B. M. Boling DATE 3-09-00